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Attorney Docket No.

First Inventor

04-016-NG

Nicholas Grande

Date

UTILITY
PATENT APPLICATION
TRANSMITTAL

Reversible Necktie Title Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Mail Stop Patent Application **APPLICATION ELEMENTS** Commissioner for Patents ADDRESS TO: See MPEP chapter 600 concerning utility patent application contents. P.O. Box 1450 Alexandria VA 22313-1450 Fee Transmittal Form (e.g., PTO/SB/17) 1. 🔽 CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) 2. 🖸 Applicant claims small entity status. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. 🗹 Specification [Total Pages_ Computer Readable Form (CRF) (preferred arrangement set forth below) Descriptive title of the invention Specification Sequence Listing on: Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D Reference to sequence listing, a table, or a computer program listing appendix CD-ROM or CD-R (2 copies); or Background of the Invention ii. Paper - Brief Summary of the Invention Brief Description of the Drawings (if filed) c. Statements verifying identity of above copies Detailed Description - Claim(s) ACCOMPANYING APPLICATION PARTS - Abstract of the Disclosure 9. Assignment Papers (cover sheet & document(s)) 4. Drawing(s) (35 U.S.C. 113) [Total Sheets _ 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) 5. Oath or Declaration Attorney [Total Sheets English Translation Document (if applicable) 11. a. Newly executed (original or copy) 12. **[** Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 b. Copy from a prior application (37 CFR 1.63(d)) Citations 13. 🔲 **Preliminary Amendment** (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) 14. (Should be specifically itemized) i. DELETION OF INVENTOR(S) Certified Copy of Priority Document(s) 15. Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR 16. 🔲 1.63(d)(2) and 1.33(b) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 6. Application Data Sheet. See 37 CFR 1.76 or its equivalent. 17. 🗹 Other: List of Inventor Duties 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Continuation-in-part (CIP) Divisional of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OR DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR Correspondence address below Name Lambert & Associates 92 State Street, Suite 200 Address City Boston State MA Zip Code 02109 Country USA Telephone (617) 720-0091 (617) 227-0313 Name (Print/Type) Melissa Patangia Registration No. (Attorney/Agent) 52.098 Signature noclisat phasea

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mall Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
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Comment to the state of the sta	95, no persons are required to	respond to a collection of inf	ormation unless it displays a valid OMB con	<u>itrol numb</u> er
FEE TRANSMITTAL		Complete if Known		
To for EV	DIVIDIAL INC	Application Number		
Fifective 10/01/2003. Patent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27		Filing Date		
		First Named Inventor	Nicholas Grande	
		Examiner Name		
	See 37 CFR 1.27	Art Unit		
TOTAL AMOUNT OF PAYMENT	(\$) 471	Attorney Docket No.	04-016-NG	
METHOD OF PAYMENT (checi	k all that apply)	FEE C/	ALCUL ATION (continued)	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
Check Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	Large Entity Small Entity			
Denosit	Fee Fee Fee Fee Code (\$) Code (\$) Fee Description			
Account Number	Fe W	e Paid		
Deposit Account Lambert & Associates	1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 25 Surcharge - late provisional filing fee or			
Name	cover sheet			
The Director is authorized to: (check all that apply)	1053 130 1053 130 Non-English specification			
Charge fee(s) indicated below Credit any overpayments	1812 2,520 1812 2,520 For filing a request for ex parte reexamination			
Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after			
to the above-identified deposit account.	Examiner action			
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month	-		
1. BASIC FILING FEE Large Entity Small Entity	and the state of t	_		
Fee Fee Fee Fee Description Fee Paid	2 Zandon ici tepiy waliin tilid illohii			
Code (\$) Code (\$) 1001 770 2001 385 Lhility filing fee	Extension for reply within fourth month			
385	1255 2,010 2255 1,005 Extension for reply within fifth month	-		
den and and area of the beautiful failing fee	1401 330 2401 165 Notice of Appeal			
tank ming too	1402 330 2402 165 Filing a brief in support of an appeal			
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing			
1 Totalona ming lee	1451 1,510 1451 1,510 Petition to institute a public use proceeding			
SUBTOTAL (1) (\$) 385	A 450 A 600	——		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,330 2453 665 Petition to revive - unintentional			
Fee from Ext <u>ra Claims below</u> Fee Paid	1501 1,330 2501 665 Utility issue fee (or reissue) 1502 480 2502 240 Design issue fee			
Total Claims 16 -20** = 0 x =	1502 480 2502 240 Design issue fee			
Independent Claims 5 - 3** = 2 x 43 = 86	1460 130 1460 130 Petitions to the Commissioner			
Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity Small Entity Fee Fee Fee Fee Fee Pescription	1806 180 1806 Submission of Information Disclosure Stmt			
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	Possessing such assessment of the second of			
1202 18 2202 9 Claims in excess of 20	property (times number of properties)			
1201 86 2201 43 Independent claims in excess of 3	1809 770 2809 385 Filling a submission after final rejection (37 CFR 1.129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be			
1204 86 2204 43 ** Reissue independent claims	examined (37 CFR 1.129(b))			
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1801 770 2801 385 Request for Continued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application			
SUBTOTAL (2) (\$) 86	Other fee (specify)			
**or number previously paid, if greater, For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0	i		

SUBMITTED BY			(Complete (if applicable))
Name (Print/Type)	Melissa Patangia	Registration No. (Attorney/Agent) 52,098	Telephone (617)7200091
Signature	malisa ragio	I me ne marit	Date 3/11/04

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